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# STATE OF UTAH

## Commission on Criminal and Juvenile Justice

MICHELE CHRISTIANSEN Executive Director

### UTAH SEXUAL VIOLENCE COUNCIL

**Treatment Committee** 

Meeting Notes March 16, 2006

**Members present**: Ron Sanchez , Mike Conn, Jan Nicol, Jeremy Shaw, Alana Kindness, Bobbi Morgan, Cora Peterson, Ron Gordon

#### **Treatment within Prison**

- Approximately 1700 convicted sex offenders are currently incarcerated.
- There has been no increase in sex offender treatment funding since 1996.
- To deal with rising need and stagnant resources, DOC has reduced the length of sex offender treatment and instituted a priority system. Risk assessments help determine the likelihood of committing another sex offense.
- Treatment is currently about 18 months. Ideally, treatment begins approximately 24 months prior to when the offender is likely to be released from prison.
- Full staffing for the prison is 7.5 therapist. The FY07 building block requested over \$750,00.
- Sex offender treatment at the prison is reaching a crisis and is falling further behind every year.
- The caseload of 24:1 is twice the recommended average.

#### **Treatment of Probationers and Parolees**

- In the Salt Lake area, there about 600 sex offenders on probation or parole. Statewide, there are about 1200 sex offenders on probation or parole.
- There are four residential half-way houses with a total of 157 beds for sex offenders.
- Outpatient sex offender treatment is regulated by DOC, which maintains a list of approved providers.
- In Salt Lake County, the offender pays for outpatient treatment unless the offender is indigent. AP&P provides free treatment to 50 offenders at a time. The waiting list varies from two to six months. There are sufficient providers along the Wasatch Front for offenders who can pay.
- Jeremy will inquire about sex offender treatment in other AP&P regions.
- DOC establishes standards for sex offender treatment. However, enforcement of those standards is problematic.
- There has been no increase in state funding for community treatment beds over the last ten vears.
- Many private substance abuse treatment providers do not provide treatment to sex offenders.

#### **Treatment of Juvenile Offenders**

- Service along the I-15 corridor is very good. Outside that area, there are some gaps in availability of treatment.
- Some juveniles are actually being over-treated.
- JJS has 35 secure beds for sex offenders,
- JJS is providing sex offender treatment to about 100 juveniles.
- Priority issues: quality assurance of services; integration of treatment (sex offender, substance abuse, mental health)

#### **Top Priorities for Treatment of Offenders**

- Increase access to services in rural areas.
- Enforce standards for evidence-based treatment.

#### **Treatment of Victims**

- RRC is the only no-cost treatment for victims of sexual violence.
- Two main groups of clients: 18-25 year old women who were recently assaulted; 18-65 year old women were assaulted as children.
- Priorities for treatment of victims
  - More therapists
  - o More resources for housing, medication
  - o More treatment for underserved populations (men, people with disabilities, refugees, victims whose primary language is not English)
  - o Cross-training among therapists and criminal justice agencies.

### **Court and Board-Ordered Treatment for Probationers and Parolees**

- Treatment will be a condition of probation or parole and tracked by the agents as all other conditions of probation and parole.
- If offenders along the Wasatch Front are not attending treatment, a violation of probation or parole will be pursued. It is not currently known how these violations are handled outside the Wasatch Front, where treatment is not as readily available.
- Region 3 (Salt Lake) has specialized agents for sex offenders. Should the subcommittee recommend training for non-specialized agents supervising sex offenders?

#### **Assignments**

- Jeremy will inquire about sex offender treatment in other AP&P regions.
- Mike, Jeremy, and Cora will bring treatment standards to the next meeting.
- Mike and Jeremy will be prepared to discuss what it would take to enforce treatment standards.

Next Meeting: April 27 at 9am at the Rape Recovery Center (2035 S. 1300 E.).